Name in Full

Certificate of Death

Wm Carly - Best -

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month July Day 20 Age Y. 2 M. 2 D. Native of Frederick Occupation -

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband ~~of~~

Wife

Father's Name David H. Best - Mother's Name Margaret - Carly -

Cause of Death Primary Entero Colitis 82 How long sick 12 days

Immediate Meningitis ~~Accident, Suicide, Homicide~~

Reported by Nashoretts

Address Frederick, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968

Name in Full

Lewis A. Buck

Certificate of Death

Died at Frederick (Town) Frederick (County) MARYLAND

Date 1898 Month July Day 21 | Age Y. 74 M. 10 D. 24 | Native of Baden, Ger. | Occupation Blacksmith

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living 3

~~Wife~~ Husband of Ann C. Staub

Father's Name Philip Buck

Mother's Name Christiana Schubert

Cause of Death: Primary Cerebral Apoplexy 42 — How long sick 6 months

Immediate Encephalitis

~~Accident, Suicide, Homicide~~

Reported by Talbert

Address 17 E 2nd St. Frederick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Charles Care

Certificate of Death

Died at Town Brunswick County Frederick MARYLAND

Date 189 8 Month July Day 30 Age Y. M. D. Native of Occupation Railroad man

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow ~~Widower~~ ~~Divorced~~ Number of children living

Husband of Wife

Father's Name

Mother's Name 161

Cause of Death Primary Phthisis Pulmonalis How long sick

Immediate Accident, Suicide, Homicide

Reported by J. Chester McPherson

Address Brunswick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Mrs Sarah E. Compton

Died at Town: Frederick County: Fredk MARYLAND

Date 1898 Month: July Day: 1 | Age Y. 44 M. - D. 14 | Native of Va. | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 2

Husband / Wife of Wm F. Compton

Father's Name Julius Harper | Mother's Name Virginia Harper

Cause of Death: Primary Chronic Gastric Catarrh | How long sick 4 mos.

Immediate Secondary Anaemia - 81 | ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Chas. F. Goodeve M.D.

Address Frederick. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65988

Name in Full — Geo. A. Crum — Certificate of Death

Died at — Town: Frederick — County: ditto — MARYLAND

Date 189 8 — Month: 7 — Day: 25 — Age: Y. X M. 1 D. 21 — Native of: Md. — Occupation:

Male — ~~Female~~ — White — ~~Colored~~ — ~~Married~~ — ~~Single~~ — ~~Widow~~ — ~~Widower~~ — ~~Divorced~~ — ~~Number of children living~~ 1

Husband / Wife of —

Father's Name: Frank Crum

Mother's Name: Stick

Cause of Death — Primary: Marasmus — How long sick: since birth

Immediate: asthenia — Accident, Suicide, Homicide

Reported by: C. J. Goodwin. M.D.

Address: Frederick md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Charlotte Virginia Hargett Kennedy

Town

County

Died at Frederick Frederick MARYLAND

Month Day Y. M. D.

Native of ~~Occupation~~

Date 189 8 July-10 Age 1-5- Maryland

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~of~~
~~Wife~~

Father's Name John Kennedy 130a

Mother's Name Lillian Poole

Cause of Death: Primary Congenital atelectasis 138 — How long sick 2m 15 1-5

Immediate Failure to nourish

~~Accident, Suicide, Homicide~~

Reported by H. H. Smith

Address Frederick Md 40 E. 2nd St

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

Name in Full Elsie J. Knupple

Certificate of Death

Died at Town Frederick County Fredk MARYLAND

Date 1898 Month July Day 6 | Age Y. M. 6 D. — | Native of Fredk | Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number ~~of~~ children living

Husband / Wife of —

Father's Name Isaac Knupple 87 Mother's Name Ellie Maloney

Cause of Death: Primary Cholera Infantum — How long sick 48 hours

Immediate Exhaustion — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Chas F Goodell MD

Address Frederick. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Killiany Nellie.

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month 7 Day 15 Age Y. 17. M. D. Native of City Occupation Factory Girl

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widow~~ ~~Number of children living~~

Husband of Wife

Father's Name William Killiany Orch Mother's Name Laura Buckey

Cause of Death Primary Scrofulous Diathesis How long sick 4 days.

Immediate Blood Poisoning 125 under treatment ~~Accident, Suicide, Homicide~~

for [illegible] of face.

Reported by Hy P. Fahrney MD.

Address Frederick Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

C. C. Carty
Mt Olivet Cemetery
July 16 '99

Name in Full

Certificate of Death

Tom Alexander Quynn

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month July Day 23 Age Y. — M. 4 D. 29 Native of Md Occupation —

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ of ~~Wife~~

Father's Name John S. Quynn Mother's Name Jane Holt

Cause of Death Primary Cholera Infantum 82 How long sick 6 days

Immediate Meningitis-Convulsions Ac~~ident, Suicide,~~ Homicide

Reported by [illegible]

Address Frederick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Lydia A E. Ramsburg

Died at Town: Frederick County: Frederick MARYLAND

Date 1893 Month: July Day: 7. Age Y. 77. M. 9. D. 19 Native of Fredk Co Occupation Housewife

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ ~~Widower~~ ~~Divorced~~ Number of children living

Husband of Wife Dennis Ramsburg

Father's Name Lawrence Bumgle Mother's Name Mary Baumgle

Cause of Death: Primary Eteritis q3 How long sick Six Days

Immediate Coma Accident, Suicide, Homicide

Reported by Wm H. Baltzell M D

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full: Rowe

Certificate of Death

Died at Town: Fredk County: Fredk MARYLAND

Date 1898 Month: July Day: 5th Age Y. M. D.: Still Born Native of Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

2 Female's ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband / Wife of X

Father's Name: Harry W. Rowe

Mother's Name: Bertha Mobley

Cause of Death: Primary: Don't know

Immediate: Don't know

How long sick

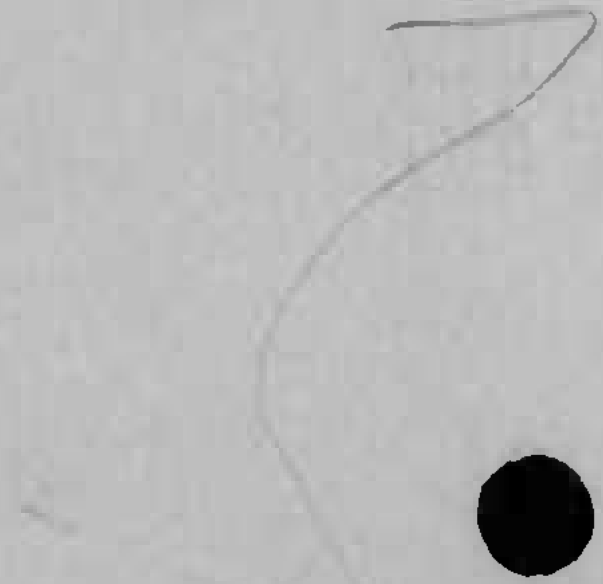
~~Accident, Suicide, Homicide~~

Reported by: S. T. Haffner, M.D.

Address: Fredk Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Infant not named

Certificate of Death

Rucker

Died at Town Brunswick County Frederick MARYLAND

Date 1898 Month July Day 11 Age ~~Yr.~~ M. 3 D. 3 Native of Md. Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Chas H. Rucker 137 Mother's Name Sarah Payne

Cause of Death Primary Congenital Malformation, Hairy & Cleft Goldie

Immediate Immutation

How long sick 93 days

~~Accident, Suicide, Homicide~~

Reported by Levin West

Address Brunswick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6596B

Quatro pesetas

Name in Full: Smith Mary Jane.

Certificate of Death

Died at Town: Frederick / County: Frederick —— MARYLAND

Date 1898 Month: July Day: 7 | Age Y. 33 M. -X- D. -X- / Native of —— Occupation: Housewife

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living

~~Wife~~ Husband of Robert Smith

Father's Name unknown Mother's Name unknown

Cause of Death: Primary Abortion — Midwife attended / How long sick 3 weeks

Immediate 119 Septic Pneumonia. Accident, Suicide, Homicide

Reported by Henry P. Fahrney M.D.

Address Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Smothers (Smothers)

Certificate of Death

Died at Town: Frederick County: Frederick MARYLAND

Date 189 6 Month: July Day: 13 | Age Y. 14 M. D. | Native of Md. | Occupation —

~~Male~~ / Female | ~~White~~ / Colored | ~~Married~~ / ~~Single~~ | ~~Widow~~ / Widower | ~~Divorced~~ / Number of children living

Husband / Wife of

~~Father's~~ Name

Mother's Name Harriett Smothers

Cause of Death: Primary — Mal Nutrition 140 — How long sick since Birth

Immediate — Convulsions — Accident, Suicide, Homicide

Reported by H. Schneider.

Address Frederick

Must be signed by ~~physician~~, if any in attendance, otherwise by ~~coroner~~, undertaker or ~~minister~~.

LIBRARY BUREAU. 65968

Name in Full — Certificate of Death

Henry Sovington

Died at — Town: Frederick — County: Frederick — MARYLAND

Date 1898 — Month: 7 — Day: 23 — Age: Y. 52 M. — D. — Native of: Maryland — Occupation: Labor

Male ~~Female~~ — ~~White~~ Colored — Married ~~Single~~ — ~~Widow~~ ~~Widower~~ — ~~Divorced~~ — Number of children living: 3

Husband of Wife: Mary E. Sovington

Father's Name: X — X

Mother's Name: X — X

Cause of Death — Primary: Asthma 76 — How long sick: one year

Immediate: Dilitation of Heart — Accident, Suicide, Homicide

Reported by: Dr W a Longs

Address: 45 S. Market St Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Edward C. Swamly

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 8 Month July Day 3 Age Y. 28 M. D. Native of Md Occupation Laborer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow ~~Widower~~ ~~Divorced~~ Number of children living 4

Husband ~~Wife~~ of Ida Belle Lease

Father's Name Daniel Swamly Mother's Name Eliza Trayer

Cause of Death Primary Typhoid Fever How long sick 11 days

Immediate Intestinal Perforation ~~Accident, Suicide, Homicide~~

Reported by U. A. Sharetts

Address Frederick Frederick Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

New Market
July 4th 1878
C. C. Carty

Name in Full — Certificate of Death

George Franklin Walter

Died at Town: W. Pat St. County: Frederick City — MARYLAND

Date 1898 — Month: 7 Day: 12 | Age Y.: 0 M.: 10 D.: 0 | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow Widower | ~~Divorced~~ | Number of children living

Husband / Wife of X

Father's Name: Jno Walter — Mother's Name: X

Cause of Death — Primary: Indigestion & Heat 82 — How long sick: 6 days

Immediate: Gastro enteritis — Accident, Suicide, Homicide

Reported by: Franklin Buchanan Jones

Address: City

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full George R Watts

Certificate of Death

Died at Town Creswell County Frederick MARYLAND

Date 1898 Month July Day 4 | Age Y. 28 M. 6 D. | Native of Md | Occupation Miller

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 2

~~Wife~~ Husband of Mary Cayne

Father's Name John Quincy Watts | Mother's Name Mary Francis

Cause of Death: Primary accidental drowning 14? | How long sick

Immediate asphyxiation | Accident, ~~Suicide, Homicide~~

Reported by W. A. Shanks

Address Frederick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Esau P. Werking

Died at Town: Petersville County: Frederick MARYLAND

Date 1898 Month: July Day: 23 Age Y. 68. M. D. Native of: Pa. Occupation: Wheelwright

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 5

Husband / Wife of Henrietta Hoffman

Father's Name — Mother's Name 57 —

Cause of Death: Primary Organic Heart disease & Chronic Nephritis — How long sick 1 yr

Immediate Exhaustion with General Dropsy — ~~Accident, Suicide, Homicide~~

Reported by Levin West

Address Brunswick Frederick Pa

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Name in Full: Thomas Luther Whitter

Certificate of Death

Died at — Town: Frederick — County: Frederick — MARYLAND

Date 1898 — Month: July — Day: 28 — Age: Y. 67 M. x D. x — Native of: Frederick — Occupation: RR Watchman

Male — White — ~~Married~~ — ~~Widow~~ — ~~Divorced~~

~~Female~~ — ~~Colored~~ — Single — ~~Widower~~ — ~~Number of children living~~

Husband / Wife of: X

Father's Name: Unk. — Mother's Name: Unk

Cause of Death — Primary: Softening of Brain — How long sick: 7 months

Immediate: Coma 43 — Accident, Suicide, Homicide

Reported by: W. H. Baltzell M.D.

Address: Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Viola Wigington

Died at Town Brunswick County Frederick MARYLAND

Date 1898 Month July Day 3d | Age Y. - M. 7. D. 25 | Native of Md. | Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

147

Father's Name Luther Wigington

Mother's Name Mary Jane Grout

Cause of Death: Primary High temperature (107.3°) from excessive heat — How long sick 12 hours

Immediate Eclampsia — ~~Accident, Suicide, Homicide~~

Reported by Levin West M.D

Address Brunswick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Miriam E. Mobberly

Certificate of Death

Died at Town: Fredk County: Fredk MARYLAND

Date 189 8 Month 7 Day 1.5 Age Y. – M. 3 D. Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number~~ of children living

~~Husband~~ ~~Wife~~ ~~of~~

Father's Name Ernest Mobberly Mother's Name Mobberly

Cause of Death Primary Heat Stroke 147 How long sick two weeks

Immediate Exhaustion ~~Accident, Suicide, Homicide~~

Reported by Dr Wm Crawford Johnson

Address Fredk Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Дирик

Name in Full

Certificate of Death

Mary Josephine Yates

Died at Town Knoxville County Frederick Co MARYLAND

Date 189 8 Month July Day 13 Age Y. 68 M. D. Native of Md Occupation Housekeeper

~~Male~~ Female White ~~Colored~~ ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name Edward Yates

Mother's Name Catherine Richards

Cause of Death: Primary Phthisis 22.a How long sick 5 or 6 years

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by Levin West M.D.

Address Brunswick Frederick Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Town

Died at Brunswick

County

Frederick MARYLAND

Month Day Y. M. D. Native of Occupation

Date 189 9 July 2 Age 1 Md —

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single Widower ~~Number of children living~~

Husband of

Wife

1386

Father's Name George Jones

Mother's Name

Cause of Death: Primary Premature Birth 7 Mo

~~How long sick~~

Immediate

~~Accident, Suicide, Homicide~~

Reported by A. G. Hornig M D

Address Brunswick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968